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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number		10/502,417-Conf. #2043	
	Filing Date		February 15, 2007	
	First Named Inventor		Bakulesh Mafatlal Khmar	
	Title		THE METHOD OF TREATING CANCER	
	Art Unit		1645	
	Examiner Name		J. E. Graser	
Attorney Docket No.		21059/0206951-USO		

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number: 07278

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☐ Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Bakulesh M. Khmar</i>	Date	28-Dec-2007
Name	Bakulesh Mafatlal Khmar	Telephone	+91-2718-225001
Title and Company	Inventor		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of 1 forms are submitted.